	Appro	ved	For Release	2006/1	CONFLOE	11 11 -00	 399	R000100 ⁻	130021-0	DD	S/OL/BFB-		
REPORTS INVENTORY									CONTROL NO.				
PREPARE IN DUPL	ICATE								See Abo	ve			
I. TITLE OF REPO)RT (1f	a fi	II-in report i	nclude F	orm No.)	<u> </u>	• • • • • • • • • • • • • • • • • • • •	2.	TYPE X	STATE	STICAL		
Lapsed Appropriations. "M" Report													
		7	PERSONNEL		T T #6:			IX	EPORT		NE-NAME LISTIN		
3. FUNCTIONAL AREA		2			TRAINING SECURITY			AC	DMIN. GENERAL				
			MEDICAL		 	1 FINANCE		"	OTHER (specify)				
4. NO. OF COPIES	PREPAR	₹ED	5. FREQUENCY	(weekly,	monthly, qu	onthly, quarterly, etc.)			6. DISTRIBUTION (No. of components not				
2			Annually					numbe	r of copic	:s) 2	,		
7. FORMAT (memor computer prin	andum,	form	8. ADP PROCESSING 9. DI					RECTIVE AUTHORITY REQUIRING REPORT					
Memorandum	040,	1	YES IF	YES GIVE	ADP PROCESS	SING NO.	△ -€-€-		Ta	10T - 1 *	0 50		
10. PREPARING COM	PONENT	(incl		ve I	III. EEENED	DEDARTS (C.			Finance				
contributing	informa	tion	to report)		II. FEEDER Form No	or nomer	rate t nclatu	otal numb re. Atta	er and id ich separa	entify te shee	by Title, t if necessary		
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Budget and	Fisca	l Br	canch, EO/O	L	1.	Lapsing Y	Year	Obliga	tion St	atus]	Report		
						'M" Obli	gatio	on Stat	us Repo	rt			
			A MA			FACTORS							
GRADE	HOUR	LY	LIABLE DE	R _	REPARATTO COST PER	* 700		COSTS	<u> </u>				
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TOTAL COSTS PER YEAR 3. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or au INCLUDE DATE REPORT WAS ELEST STATED AND COMPONENT AND CONTROLLED.									\$1,004.22				
3. COMPLETE DETAIL	LED JUS	STIFIC	CATION FOR THIS IRST STARTED A	REPORT	(in additio	n to direct	ive o	r authori	ty cited i	in item	9). IF KNOWN		
This report:	, cons	SOTI	aatea with	report	s receive	ed from o	ther	Agency	compor	ients,	contains		
applicable	to lar	sed	appropriat	ions.	Based or	ar dorra	rt. As	tion n	unliqui Toridod	_dated	l obligation		
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